UNITED STATES DISTRICT COURT
DISTRICT OF NEW JERSEY

IN RE: ALLERGAN BIOCELL TEXTURED BREAST IMPLANT PRODUCTS LIABILITY LITIGATION	MDL NO. 2921
Plaintiff[s]: Carol Estabrook	Honorable Brian R. Martinotti District Court Judge
Case No.:	Honorable Joseph A. Dickson Magistrate Judge
	MASTER SHORT-FORM COMPLAINT FOR PERSONAL INJURIES, DAMAGES AND DEMAND FOR JURY TRIAL

1. Plaintiff Carol Estabrook, hereby state and incorporate by reference all of the allegations contained in Plaintiffs' Master Long Form Complaint For Personal Injuries, Damages and Demand For Jury Trial ("Master Complaint") as permitted by Case Management Order No. 6 for cases filed directly into this district.

2. In addition to the below-indicated portions of the Master Complaint adopted by the plaintiff(s) and incorporated by reference herein, Plaintiff(s) hereby allege(s) as follows:

IDENTIFICATION OF PLAINTIFFS AND RELATED INTERESTED PARTIES

3. Carol Estabrook, who resides at 36A Dry Hill Road, in Rochester, New Hampshire, is alleged to have suffered personal injuries and related damages due to implantation of one or more Biocell Textured Breast Implant medical devices ("Biocell"): Allergan Natrelle Highly Cohesive Anatomically Shaped Silicone-Filled Breast Implants.

4. Consortium Claim(s): Name and current residence of individual(s) alleging damages for loss of consortium:

5. If a survival and/or wrongful death claim is asserted:

Name and residence of Decedent when she suffered Biocell-related injuries and/or death: N/A

Name and current residence of the individual(s) bringing the claims on behalf of the decedent's estate, and status (i.e., personal representative, administrator, next of kin, successor in interest, etc.): N/A

VENUE

6. Plaintiff[s] allege that venue for remand and trial is proper in the following federal judicial district:

United States District of New Hampshire

DEVICE IDENTIFICATION

7. [Plaintiff/Decedent] used the following Biocell device[s], which Plaintiff contends caused her injury(ies). Check all that apply and provide all dates of implant and explant:

☐ **NATRELLE Silicone-filled Breast Implants** ☐ **Style 110** ☐ **Style 115** ☐ **Style 120** **Date[s] of Implant:** **Date[s] of Explant (if any):**	☐ **NATRELLE Saline-Filled Breast Implants** ☐ **Style 163** ☐ **Style 168** ☐ **Style 363** ☐ **Style 468** **Date[s] of Implant:** **Date[s] of Explant (if any):**
☐ **NATRELLE 410 Highly Cohesive Anatomically Shaped Silicone-Filled Breast Implants** ☐ **Style LL**	☐ **NATRELLE INSPIRA Silicone-Filled Breast Implants** ☐ **Style TRL** ☐ **Style TRLP** ☐ **Style TRM**

☐ **Style LM** ☐ **Style LF** ☐ **Style LX** ☐ **Style ML** ☐ **Style MM** ☐ **Style MF** ☐ **Style MX** ☐ **Style FL** ☐ **Style FM** ☒ **Style FF** ☐ **Style FX** **Date[s] of Implant: 2/2/2015 Date[s] of** **Explant (if any): 9/1/2020**	☐ **Style TRF** ☐ **Style TRX** ☐ **Style TSL** ☐ **Style TSLP** ☐ **Style TSM** ☐ **Style TSF** ☐ **Style TSX** ☐ **Style TCL** ☐ **Style TCLP** ☐ **Style TCM** ☐ **Style TCF** ☐ **Style TCX** **Date[s] of Implant:** **Date[s] of Explant (if any):**
☐ **McGhan BioDIMENSIONAL® Silicone-Filled BIOCELL® Textured Breast Implants, Style 153** **Date[s] of Implant:** **Date[s] of Explant (if any):**	☐ **NATRELLE Dual-Gel Breast Implants** ☐ **Style LX** ☐ **Style MX** ☐ **Style FX.** **Date[s] of Implant:** **Date[s] of Explant (if any):**
☐ **NATRELLE Komuro Breast Implants** ☐ **Style KML** ☐ **Style KMM** ☐ **Style KLL** ☐ **Style RLM** **Date[s] of Implant:** **Date[s] of Explant (if any):**	☐ **NATRELLE Ritz Princess Breast Implants** ☐ **Style RML** ☐ **Style RMM** ☐ **Style RFL** ☐ **Style RFM** **Date[s] of Implant:** **Date[s] of Explant (if any):**
☐ **NATRELLE 150 Full Height and Short Height double lumen implants.** **Date[s] of Implant:** **Date[s] of Explant (if any):**	☐ **NATRELLE 133 Plus Tissue Expander** **Date[s] of Implant:** **Date[s] of Explant (if any):**
☐ **NATRELLE 133 Tissue Expander with Suture Tabs**	☐ **OTHER (Please describe):**

Date[s] of Implant: **Date[s] of Explant (if any):**	**Date[s] of Implant:** **Date[s] of Explant (if any):**

PLAINTIFF'S BIOCELL-RELATED INJURIES

8. Plaintiff[s] allege that one or more Biocell devices caused personal injuries and damages including but not limited to the following: BIA-ALCL, past, present and future damages, including, but not limited to, pain and suffering for severe and permanent personal injuries sustained by Plaintiff, permanent impairment, mental pain and suffering, loss of enjoyment of life, past and future health and medical care costs, and economic damages including past and future lost earnings and/or earning capacity, together with interests and costs as provided by law.

9. Approximate date of Biocell-device related injury: August 2020

10. Has Plaintiff or Plaintiff's decedent ever been diagnosed with BIA-ALCL:

- X Yes
- ☐ No

11. If Yes, date of diagnosis: August 12, 2020

CAUSES OF ACTION

11. The following claims asserted in the *Master Complaint* are herein adopted by Plaintiff(s):

- ☒ Count I: Strict Liability – Manufacturing Defect
- ☒ Count II: Negligent Manufacturing
- ☒ Count III: General Negligence
- ☒ Count IV: Strict Liability Failure to Warn
- ☒ Count V: Negligent Failure to Warn
- ☒ Count VI: Negligent Misrepresentation
- ☒ Count VII: Breach of Implied Warranty of Merchantability
- ☒ Count VIII: Breach of Express Warranty
- ☒ Count IX: Strict Liability Design Defect
- ☒ Count X: Negligent Design
- ☐ Count XI: Survivorship and Wrongful Death
- ☐ Count XII: Loss of Consortium
- ☒ Count XIII: Punitive Damages

☐ Other Claims and factual basis therefore:

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_____

OTHER DEFENDANTS

12. Plaintiff(s) further bring claims against the following additional Defendants not named in the *Master Complaint*:

a. Additional Defendant(s):

Additional Defendant 1: _____

Additional Defendant 2: _____

Additional Defendant 3: _____

Additional Defendant 4: _____

b. Address(es) of Additional Defendants:

Address of Defendant 1: _____

Address of Defendant 2: _____

Address of Defendant 3: _____

Address of Defendant 4: _____

c. Short and Plain Statement of Factual Allegations against Additional Defendants:

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_____

d. Claims asserted against Additional Defendants:

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WHEREFORE, Plaintiff(s) pray(s) for relief and demand(s) a trial by jury as set forth in the Plaintiffs' Master Personal Injury Long Form Complaint in MDL 2921 in the United States District Court for the District of New Jersey.

Date: 4/1/2021

Attorney Name**: Danielle L. Pomeroy**

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